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**DIVISION - CONTINUATION - CONTINUATION-IN-PART
APPLICATION TRANSMITTAL FORM**

Attorney Docket No.:

A-378CIP2C5

Anticipated Classification Of This Application:
Class Subclass

Prior Application:
Examiner
DeBerry, R.

Art Unit
1647

10

To the Commissioner for Patents:

This is a request for filing a ☒ continuation ☐ divisional ☐ continuation-in-part application, under 37 CFR 1.53(b), of pending prior application Serial No. 09/132,985 filed on August 12, 19 98, which is a continuation of Serial No. 08/771,777 filed on 12/20/96, which is a continuation in part of Serial No. 08/706,945 filed on 09/03/96, which is a continuation in part of Serial No. 08/577,788 filed on 12/22/95.

of
for OSTEOPROTEGERIN

For CONTINUATION or DIVISIONAL APPLNs only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 1b, below, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

1. ☒ Transmitted herewith are:
- ☒ 138 pages of specification, 80 pages of sequences : 9 pages of claims,
 - ☐ 1 page of abstract, totaling 228 pages.
 - ☒ 3 pages of Oath or Declaration by the applicant(s):
 - ☐ a. Newly executed (original or copy)
 - ☒ b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional applns. only)
 - ☒ Copy of Sequence statement from parent case Serial No. 08/771,777 filed December 20, 1996
2. ☒ The filing fee is calculated below:

| For | Number Filed | | Number Extra | Rate | Fee |
|---------------------------|--------------|--------|--------------|--------------|------------|
| Total Claims | 25 | - 20 = | 5 | x \$18.00 = | \$ 90.00 |
| Independent Claims | 1 | - 3 = | 0 | x \$86.00 = | 0.00 |
| Multiple Dependent Claims | 1 | | | + \$290.00 = | 290.00 |
| Basic Fee | | | | \$770.00 = | 770.00 |
| Total Filing Fee | | | | | \$1,150.00 |

3. ☒ Please charge Deposit Account No. 01-0519, in the name of Amgen Inc., in the amount of \$1,150.00. An original and one copy are enclosed.
4. ☒ Throughout the prosecution of this application, if any extension of time is necessary, please consider this a request therefor.
5. ☒ The Commissioner is hereby authorized to charge any additional filing fees which may be required by the accompanying application, any additional fees which may be required during pendency of this application as required by 37 CFR 1.16 or 1.17, or credit any overpayment to Deposit Account No. 01-0519 throughout the prosecution of this application.
6. ☒ Cancel in this application original claims 1-48, 50 and 54-60 of the prior application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)

EXPRESS MAIL CERTIFICATE

Express Mail mail labeling number: EL360693585US

Date of Deposit: January 20, 2004

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Jay A. Vasel
Printed Name

[Signature]
Signature

7. ☒ Preliminarily, please amend the specification by inserting before the first line the following:

-- This application is a continuation of Serial No. 09/132,985 filed August 12, 1998, which is a continuation of Serial No. 08/771,777 filed December 20, 1996, which is a continuation-in-part of Serial No. 08/706,945 filed September 3, 1996, which is a continuation-in-part of Serial No. 08/577,788 filed December 22, 1995 -- .

8. ☐ Transfer the drawings from the prior application to this application and abandon said prior application as of the filing date accorded this application. A duplicate copy of this sheet is enclosed for filing in the prior application file. (May only be used if signed by person authorized by § 1.138 and before payment of base issue fee.)

8a. ☐ New formal drawings are enclosed.

9. ☐ Priority of application Serial No. _____ filed on _____ in _____ (country) is claimed under 35 USC 119.

9a. ☐ The certified copy has been filed in prior application Serial No. _____ filed _____

10. ☒ The prior application is assigned of record to Amgen Inc.

11. ☒ A preliminary amendment is enclosed.

12. ☒ Also enclosed Attorney's Statement

13. ☐ Other: _____

14. ☒ The power of attorney in the prior application is to:
Ron K. Levy, Registration No. 31,539; Steven M. Ode, Registration No. 29,094; and
Robert B. Winter, Registration No. 34,458

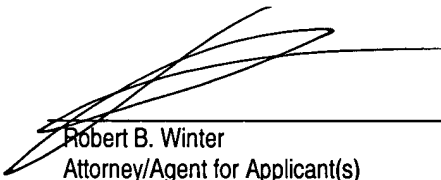
a. ☒ The power appears in the original papers in the prior application.

b. ☐ Since the power does not appear in the original papers, a copy of the power in the prior application is enclosed.

c. ☒ Address all future communications to
Robert B. Winter
 at the address below.

Signator: ☐ Assignee of complete interest

☒ Attorney or agent of record


 Robert B. Winter
 Attorney/Agent for Applicant(s)
 Registration No. 34,458
 Phone: (805) 447-2425
 Date: January 20, 2004

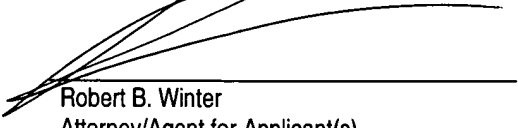
Please send all future correspondence to:

U. S. Patent Operations/ RBW
 Dept. 4300, M/S 27-4-A
 AMGEN, INC.
 One Amgen Center Drive
 Thousand Oaks, California 91320-1799, USA



21069

PATENT TRADEMARK OFFICE

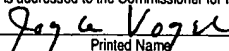
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|---|--|---------------------------|--|--|-------------|--------------------------|---------------|
| FEE AUTHORIZATION / AMENDMENT TRANSMITTAL LETTER | | | | Attorney's Docket No: A-378 CIP2C5 | | | |
| Serial No. | | Filing Date 01/20/2004 | | Examiner DeBerry, R. | | Group Art Unit 1647 | |
| In Re Application of Boyle, et al. | | | | | | | |
| For OSTEOPROTEGERIN | | | | | | | |
| TO THE COMMISSIONER FOR PATENTS: | | | | | | | |
| <input checked="" type="checkbox"/> Applicant(s) request(s) the following extension of time under 37 CFR 1.136(a): <input type="checkbox"/> One month of original due date (\$110.00) <input type="checkbox"/> Two months of original due date (\$420.00) <input type="checkbox"/> Three months of original due date (\$950.00) <input type="checkbox"/> Four months of original due date (\$1,480.00) <input checked="" type="checkbox"/> Five months of original due date (\$2,010.00) <input checked="" type="checkbox"/> A response in connection with the matter for which this extension is requested: <input checked="" type="checkbox"/> is filed herewith. <input type="checkbox"/> has been filed. <input type="checkbox"/> The response is the filing of a continuing prosecution application, the prior application having an express abandonment conditioned on the granting of a filing date to the continuing application. <input type="checkbox"/> The accompanying papers include amended claims for which no additional fee is required. <input type="checkbox"/> The accompanying papers include amended claims the fee for which has been calculated as follows: | | | | | | | |
| CLAIMS AS AMENDED | | | | | | | |
| (1) | (2) Claims remaining After amendment | (3) | (4) Highest number Previously paid for | (5) No. of Extra claims present | (6) Rate | (7) Additional Fee | |
| Total Claims | * | Minus | ** = | 0 | x \$18 | = | \$ 0.00 |
| Indep. Claims | * | Minus | *** = | 0 | x \$86 | = | 0.00 |
| <input type="checkbox"/> First Appearance of a multiple dependent claim | | | | | + \$290 | = | 0.00 |
| Total Additional Fee for this Amendment | | | | | | | \$0.00 |
| <p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col 1. of a prior amendment or the number of claims originally filed.</p> <p><input type="checkbox"/> The following other fees are incurred by the accompanying papers. <input type="checkbox"/> Other: _____</p> <p>Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$ 2,010.00. A duplicate copy of this petition is attached.</p> <p><input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a request therefore. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.</p> | | | | | | | |
| Please Send Future Correspondence To: US Patent Operations/ RBW Dept. 4300, M/S 27-4-A AMGEN INC. One Amgen Center Drive Thousand Oaks, California 91320-1799 | | | |  Robert B. Winter Attorney/Agent for Applicant(s) Registration No.: 34,458 Phone: (805) 447-2425 Date: January 20, 2004 | | | |

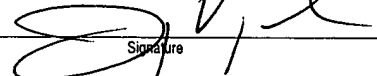
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 Printed Name


 Signature